ROLLING MEADOWS NURSING/REHABILITATION

1155 SOUTH MILITARY ROAD

FOND DU LAC 54937 Phone: (920) 929-3585 Ownership: County
Operated from 1/1 To 12/31 Days of Operation: 365 Highest Level License: Skilled
Operate in Conjunction with Hospital? No Operate in Conjunction with CBRF? No
Number of Beds Set Up and Staffed (12/31/03): 100 Title 18 (Medicare) Certified? Yes
Total Licensed Bed Capacity (12/31/03): 100 Title 19 (Medicaid) Certified? Yes
Number of Residents on 12/31/03: 86 Average Daily Census: 86

Services Provided to Non-Residents		Age, Gender, and Primary Di	_				&
Home Health Care	No			Age Groups			17.4
Supp. Home Care-Personal Care	No					1 - 4 Years	37.2
Supp. Home Care-Household Services	No	Developmental Disabilities	3.5	Under 65	7.0	More Than 4 Years	33.7
Day Services	No	Mental Illness (Org./Psy)	40.7	65 - 74	11.6		
Respite Care	Yes	Mental Illness (Other)	12.8	75 - 84	32.6		88.4
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	40.7	* * * * * * * * * * * * * * * * * * *	*****
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.2	95 & Over	8.1	Full-Time Equivalent	
Congregate Meals	No	Cancer	0.0			Nursing Staff per 100 Res	idents
Home Delivered Meals	No	Fractures	0.0		100.0		
Other Meals	No	Cardiovascular	4.7	65 & Over	93.0		
Transportation	No	Cerebrovascular	8.1			RNs	10.9
Referral Service	No	Diabetes	3.5	Gender	용	LPNs	13.7
Other Services	Yes	Respiratory	0.0			Nursing Assistants,	
Provide Day Programming for	- 1	Other Medical Conditions	25.6	Male	38.4	Aides, & Orderlies	50.2
Mentally Ill	No			Female	61.6		
Provide Day Programming for	1		100.0				
Developmentally Disabled	No			l	100.0	I	

## Method of Reimbursement

		edicare			edicaid itle 19			Other			Private Pay			Family Care			anaged Care			
Level of Care	No.	90	Per Diem (\$)	No.	οlo	Per Diem (\$)	No.	90	Per Diem (\$)	No.	οlo	Per Diem (\$)	No.	%	Per Diem (\$)	No.	્રે જ	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	7	100.0	293	49	92.5	113	0	0.0	0	16	94.1	139	9	100.0	113	0	0.0	0	81	94.2
Intermediate				4	7.5	94	0	0.0	0	1	5.9	139	0	0.0	0	0	0.0	0	5	5.8
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	7	100.0		53	100.0		0	0.0		17	100.0		9	100.0		0	0.0		86	100.0

Admissions, Discharges, and	I	Percent Distribution	n of Residents'	Condit	ions, Services, and	d Activities as of 12/	31/03
Deaths During Reporting Period	I						
	I				% Needing		Total
Percent Admissions from:	I	Activities of	용	As	sistance of	% Totally	Number of
Private Home/No Home Health	6.5	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	12.9	Bathing	0.0		62.8	37.2	86
Other Nursing Homes	8.1	Dressing	4.7		65.1	30.2	86
Acute Care Hospitals	64.5	Transferring	23.3		52.3	24.4	86
Psych. HospMR/DD Facilities	0.0	Toilet Use	15.1		40.7	44.2	86
Rehabilitation Hospitals	0.0	Eating	43.0		45.3	11.6	86
Other Locations	8.1	*****	******	*****	*****	******	*****
Total Number of Admissions	62	Continence		용	Special Treatment	ts	용
Percent Discharges To:	I	Indwelling Or Exter	nal Catheter	18.6	Receiving Resp	iratory Care	7.0
Private Home/No Home Health	10.0	Occ/Freq. Incontine	nt of Bladder	48.8	Receiving Track	heostomy Care	0.0
Private Home/With Home Health	13.3	Occ/Freq. Incontine	nt of Bowel	37.2	Receiving Suct:	ioning	0.0
Other Nursing Homes	5.0				Receiving Ostor	my Care	2.3
Acute Care Hospitals	3.3	Mobility			Receiving Tube	Feeding	2.3
Psych. HospMR/DD Facilities	3.3	Physically Restrain	ed	4.7	Receiving Mecha	anically Altered Diets	51.2
Rehabilitation Hospitals	0.0						
Other Locations	10.0	Skin Care			Other Resident Ch	haracteristics	
Deaths	55.0	With Pressure Sores		4.7	Have Advance D	irectives	100.0
Total Number of Discharges		With Rashes		3.5	Medications		
(Including Deaths)	60				Receiving Psych	hoactive Drugs	53.5

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

*************	*****	* * * * * * *	******* ership:	*******	******** Size:	******	******** ensure:	*****	*****
	This		ernment		-199		lled	Al	1
	Facility		Group		Group		Group		lities
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	86.0	88.1	0.98	87.2	0.99	88.1	0.98	87.4	0.98
Current Residents from In-County	87.2	55.3	1.58	78.9	1.11	69.7	1.25	76.7	1.14
Admissions from In-County, Still Residing	37.1	26.8	1.39	23.1	1.60	21.4	1.73	19.6	1.89
Admissions/Average Daily Census	72.1	57.4	1.26	115.9	0.62	109.6	0.66	141.3	0.51
Discharges/Average Daily Census	69.8	59.7	1.17	117.7	0.59	111.3	0.63	142.5	0.49
Discharges To Private Residence/Average Daily Census	16.3	17.8	0.92	46.3	0.35	42.9	0.38	61.6	0.26
Residents Receiving Skilled Care	94.2	85.9	1.10	96.5	0.98	92.4	1.02	88.1	1.07
Residents Aged 65 and Older	93.0	88.5	1.05	93.3	1.00	93.1	1.00	87.8	1.06
Title 19 (Medicaid) Funded Residents	61.6	76.4	0.81	68.3	0.90	68.8	0.90	65.9	0.94
Private Pay Funded Residents	19.8	18.1	1.09	19.3	1.02	20.5	0.96	21.0	0.94
Developmentally Disabled Residents	3.5	0.5	6.49	0.5	7.41	0.5	6.96	6.5	0.54
Mentally Ill Residents	53.5	47.1	1.14	39.6	1.35	38.2	1.40	33.6	1.59
General Medical Service Residents	25.6	21.1	1.21	21.6	1.19	21.9	1.17	20.6	1.24
Impaired ADL (Mean)	56.5	44.7	1.26	50.4	1.12	48.0	1.18	49.4	1.14
Psychological Problems	53.5	62.8	0.85	55.3	0.97	54.9	0.97	57.4	0.93
Nursing Care Required (Mean)	8.9	7.8	1.13	7.4	1.20	7.3	1.22	7.3	1.21